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CONFIRMATION NO. 9650

<b>SERIAL NUMBER</b> 10/728,312	<b>FILING OR 371(c) DATE</b> 12/04/2003 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3771	<b>ATTORNEY DOCKET NO.</b> 821-011725-US (PAR)
<b>APPLICANTS</b> Dieter Hochrainer, Schmallenberg, GERMANY;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/438,979 01/09/2003 <span style="float: right;">OK</span>				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 10258360 12/12/2002 <span style="float: right;">OK</span>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/01/2004</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 28518				
<b>TITLE</b> Powder inhaler comprising a chamber for a capsule for taking up a non-returnable capsule being filled with an active ingredient				
<b>FILING FEE RECEIVED</b> 986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	